

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000007207

FILED
May 29, 2007
Secretary of State

Entity Name: RACING LLC

Current Principal Place of Business:

400 LESLIE DRIVE
802
HALLANDALE, FL 33009 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 790
HALLANDALE, FL 33008 US

New Mailing Address:

FEI Number: 98-0481818 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BENOZILLO, JACOBO
400 LESLIE DRIVE
802
HALLANDALE, FL 33009 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BENOZILLO, JACOBO
Address: PO BOX 790
City-St-Zip: HALLANDALE, FL 33009 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: BENOZILLO, ISRAEL
Address: PO BOX 790
City-St-Zip: HALLANDALE, FL 33009 US

Title: MGRM () Change (X) Addition
Name: BENOZILLO, EDUARDO
Address: PO BOX 790
City-St-Zip: HALLANDALE, FL 33009 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JACOBO BENOZILLO

MGRM

05/29/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date